Image# 12952413522					PAGE 1 / 33
	EPORT OF R ND DISBURS Other Than An Autho	EMENT	S		
	E OR PRINT V	Example: If typir	ng, type	12FE4M5	Office Use Only
COMMITTEE (in full)		over the lines.			
American College of Rheu	umatology (RheumP	AC)			
ADDRESS (number and street)	200 Lake Boulevard NE				
Check if different					
than previously reported. (ACC)	\tlanta │			GA	30319
2. FEC IDENTIFICATION NUMB	ER V CITY		S	TATE 🔺	ZIP CODE
C C00432823	3. IS T REP		IEW N) OR	AM (A)	IENDED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 	b) Monthly Report Due On: (c) 12-Day Report (c) 12-Day Report for the:	(M3)		Sep	
Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election	Election c (d) 30-Day			/ • Y • Y • Y	in the State of
Year Only) (MY) Termination Report (TER)	POST-Election Report for the:	General (300	à) D - D - / Y	Runoff (3	in the
5. Covering Period 04	Election of 2012	n	M M M 06	/ D D / 30	State of
I certify that I have examined this R Type or Print Name of Treasurer	eport and to the best of my	Ĵ	pelief it is true	e, correct and	d complete.
Signature of Treasurer					
Office Use Only					FEC FORM 3X Rev. 12/2004

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

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FEC Form 3X (Rev. 02/2003)

American College of Rheumatology (RheumPAC) D D Y Y M M M M D D Report Covering the Period: 04 01 2012 06 30 From: To: COLUMN A COLUMN B

		This Period	Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		128121.95
	(b) Cash on Hand at Beginning of Reporting Period	138733.10	
	(c) Total Receipts (from Line 19)	35213.01	69817.06
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	173946.11	197939.01
7.	Total Disbursements (from Line 31)	35515.45	59508.35
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	138430.66	138430.66
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

X

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DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name American College of Rheumatology (RheumPAC) D D Y Y M D 06 30 2012 Report Covering the Period: 04 01 2012 From: To: COLUMN A COLUMN B I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 58480.00 28580.00 (i) Itemized (use Schedule A)..... 8454.00 (ii) Unitemized 4669.00 (iii) TOTAL (add 66934.00 33249.00 Lines 11(a)(i) and (ii)..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 66934.00 33249.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 Party Committees..... 0.00 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 Political Committees..... 0.00 17. Other Federal Receipts 2883.06 (Dividends, Interest, etc.)..... 1964.01 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3) 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 (c) Total Transfers (add 18(a) and 18(b)).. 0.00 19. Total Receipts (add Lines 11(d),

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DETAILED SUMMARY PAGE

of Disbursements

	II. Disbursements	COLUMN A	COLUMN B
1	Operating Expenditures:	Total This Period	Calendar Year-to-Date
1.	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))	0.00	0.00
•	Transfers to Affiliated/Other Party Committees	0.00	0.00
5.	Contributions to Federal Candidates/Committees and Other Political Committees	33500.00	56500.00
ŀ.	Independent Expenditures	0.00	0.00
5.	(use Schedule E) Coordinated Party Expenditures		
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
5.	Loan Repayments Made	0.00	0.00
			0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	365.00	365.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	265.00	
	(add Lines 28(a), (b), and (c))►	365.00	365.00
9.	Other Disbursements	1650.45	2643.35
).	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	 (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ► 	0.00	0.00
•	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35515.45	59508.35
•	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	35515.45	59508.35

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
 Total Contributions (other than loans) (from Line 11(d), page 3) 	33249.00	66934.00			
 Total Contribution Refunds (from Line 28(d)) 	365.00	365.00			
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	32884.00	66569.00			
 add Line 21(a)(i) and Line 21(b)) 	0.00	0.00			
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00			
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00			

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	for commercial purposes, other than using the			rson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) American College of Rheumato	logy (Rhe	eumPAC)						
Α.	Full Name (Last, First, Middle Initial) Jennifer May MD Mailing Address 3809 Ponderosa Court			Date of Receipt					
	City	State	Zip Code	04 10 2012 Transaction ID : 10744589					
	Rapid City	SD	57702	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		250.00					
	Name of Employer Black Hills Orthopedic & Spine Center	Occupation Physician	I						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Other (specify)		250.00						
в.	Full Name (Last, First, Middle Initial) Raymond Scalettar			Date of Receipt					
	Mailing Address 12433 Ansin Circle Drive			M M / D D / Y Y Y Y 04 16 2012					
	City	State MD	Zip Code	Transaction ID : 10757998					
	Potmac FEC ID number of contributing federal political committee.	C	20854	Amount of Each Receipt this Period					
	Name of Employer George Washington University	Occupation Clinical Pro		_					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00						
<u>с</u> .	Full Name (Last, First, Middle Initial) Jennifer May MD			Date of Receipt					
	Mailing Address 3809 Ponderosa Court			04 / Y Y Y Y 2012					
	City Rapid City	State SD	Zip Code 57702	Transaction ID : 10757999 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		0.00					
	Name of Employer	Occupation	1	_					
	Black Hills Orthopedic & Spine Center	Physician							
	Receipt For:								
	Other (specify)		250.00						
s	UBTOTAL of Receipts This Page (optional)			750.00					
т	OTAL This Period (last page this line number	only)							

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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PAGE 7 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and S for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) American College of Rheumatol	ogy (Rhe	eumPAC)							
Α.	Full Name (Last, First, Middle Initial) James Engelbrecht			Date of Receipt						
	Mailing Address 4281 Rosemary Lane	State	Zip Code	04 12 2012 Transaction ID : 10758000						
	Rapid City	SD	57702	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		250.00						
	Name of Employer Black Hills Orth and Spine Cen	Occupation Physician	1	_						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		500.00							
В.	Full Name (Last, First, Middle Initial) Cathy Chapman			Date of Receipt						
	Mailing Address 5210 Poplar Ave, Ste. 150			04 17 / Y Y Y Y 04 17						
	City Memphis	State TN	Zip Code 38119	Transaction ID : 10759173 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		2000.00						
	Name of Employer Rheumatology & Derm Assoc.	Occupation rheumatolog								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00							
С.	Full Name (Last, First, Middle Initial) M. Eric Gershwin			Date of Receipt						
	Mailing Address 25191 County Road 96			M M / D D / Y Y Y Y Y 04 18 2012						
	City Davis	State CA	Zip Code 95616	Transaction ID : 10767731 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		250.00						
	Name of Employer	Occupation	1	_						
	Division of Rheumatology/Allergy/Unive	Physician								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		250.00							
s	UBTOTAL of Receipts This Page (optional)		•	2500.00						
т	OTAL This Period (last page this line number	only)	••••••							

Use separate schedule(s) for each category of the

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PAGE 8 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than usi	and Statements may not be sold or used by any period of the name and address of any political committee				
NAME OF COMMITTEE (In Full) American College of Rheun	natology (RheumPAC)				
Full Name (Last, First, Middle Initial) A. Patrick Schuette		Date of Receipt			
Mailing Address 1334 West Arthur	State Zip Code	04 18 2012			
City Chicago	IL 60626	Transaction ID : 10769777 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С				
Name of Employer Ullinois Bone and Joint Inst	Occupation Physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) B. Herbert Baraf		Date of Receipt			
Mailing Address 2730 University Blvd W	Mailing Address 2730 University Blvd W Ste 310				
City Wheaton	StateZip CodeMD20902	04 23 2012 Transaction ID : 10781395 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	2000.00			
Name of Employer Arthritis & Rheumatism Associates, P.C	Occupation physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00				
Full Name (Last, First, Middle Initial) C. Joseph Laukaitis M.D.		Date of Receipt			
Mailing Address 6909 Rannoch Road		M M / D D / Y Y Y Y Y 04 26 2012			
City Bethesda	StateZip CodeMD20817	Transaction ID : 10787967 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation				
Self-Employed	Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Other (specify)	250.00				
SUBTOTAL of Receipts This Page (option	nal)	2750.00			
TOTAL This Period (last page this line nu	mber only)				

Use separate schedule(s) for each category of the

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PAGE 9 OF

	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Rheumat	ology (RheumPAC)	
Full Name (Last, First, Middle Initial) A. Rita Egan Mailing Address Arthritis Center of Lexingtor 330 Waller Ave Ste 100 City Lexington FEC ID number of contributing federal political committee. Name of Employer ACL Receipt For: Primary General	State Zip Code KY 40504 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 04 26 2012 Transaction ID : 10787968 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. James S. Deneke Mailing Address PO Box 11375	Date of Receipt	
City Fort Smith FEC ID number of contributing federal political committee. Name of Employer Cooper Clinic Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code AR 72917 C Occupation rheumatologist Aggregate Year-to-Date ▼ 500.00	Transaction ID : 10787972 Amount of Each Receipt this Period 500.00
C. Full Name (Last, First, Middle Initial) C. Carlos A Plata M.D. Mailing Address 7812 Lindsey Lane City Amarillo FEC ID number of contributing federal political committee. Name of Employer Amarillo Medical Specialists Receipt For: Primary General Other (specify) ▼	State Zip Code TX 79121-1931 C Occupation Physician Aggregate Year-to-Date ▼ 250.00 250.00	Date of Receipt 04 26 2012 Transaction ID : 10788382 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number	er only)	 1000.00 1000.00

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) American College of Rheuma	tology (Rhe	eumPAC)							
Full Name (Last, First, Middle Initial) Dr. Stephen Soloway Mailing Address 2848 S. Delsea Dr City Vineland	State NJ	Zip Code 08360	Date of Receipt 04 26 2012 Transaction ID : 10788384 Amount of Each Receipt this Period						
 FEC ID number of contributing federal political committee. Name of Employer Arhtritis & Rheumatology Associates of Receipt For: Primary General Other (specify) ▼ 	C Occupation MD Aggregate	Year-to-Date ▼ 1000.00	1000.00						
B. Full Name (Last, First, Middle Initial) Dr. John S. Sergent Mailing Address City	Dr. John S. Sergent Mailing Address								
FEC ID number of contributing federal political committee. Name of Employer Vanderbilt University Receipt For: □ Primary □ General Other (specify) ▼	Occupation Professor o		Amount of Each Receipt this Period						
Full Name (Last, First, Middle Initial) C. Dr. Robert C Fuhlbrigge Mailing Address 42 Brook St. City Brookline FEC ID number of contributing federal political committee. Name of Employer Children's Hospital - Boston Receipt For: Primary General Other (specify)	State MA C Occupation Physician Aggregate	Zip Code 02445 Year-to-Date ▼ 500.00	Date of Receipt						
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\ \	ie of COMMITTEE (In Full) nerican College of Rheumato	logy (Rhe	eumPAC)								
A. Ke	Name (Last, First, Middle Initial) vin Kempf				Date of Receipt						
Maili City	ng Address 19272 Stone Oak Pkwy, #101	State	Zin Codo		05	/	0 07	/ Y	y y 2012	Y	
	Antonio	TX	Zip Code 78258					080505	3 is Period	4	
	ID number of contributing ral political committee.	С								0.00	
	e of Employer umatology Assoc. of So. TX	Occupation rheumatolo									
Rece	eipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		250.0	00							
	Name (Last, First, Middle Initial) era Oza				Date of	Rec	eipt				
Maili	ng Address 2574 Admirals Walk Dr S				м м 05	/	09	/ Y	y y 2012	Y	
City Orar	nge Park	State FL	Zip Code 32073-6102		Transaction ID : 10820024 Amount of Each Receipt this Period						
	ID number of contributing ral political committee.		1100					0.00			
	e of Employer Employed	Occupation Physician	I								
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.0	00							
	Name (Last, First, Middle Initial)				Date of	Rec	eipt				
Maili	ng Address 1301 W 38th Street Suite 702				м м 05	/	D D 10	/ Y	y y 2012	Y	
City Aus	tin	State TX	Zip Code 78705					082018	3 is Period	ł	
	ID number of contributing ral political committee.	С			250.00						
Nam	e of Employer	l									
self		physician									
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.0	00							
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PAGE 12 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b 14		11c 15	12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) American College of Rheumato	logy (Rhe	eumPAC)								
Α.	Full Name (Last, First, Middle Initial) Karla B. Jones Mailing Address 700 Childrens Dr City Columbus FEC ID number of contributing federal political committee. Name of Employer Nationwide Children's Hospital Receipt For:		Zip Code 43205-2692			sact	ion ID		/ Y 0823712 ceipt thi	2012 2 2 500	Y .00
	Other (specify)		500.00								
В.	Full Name (Last, First, Middle Initial) Audrey Uknis Mailing Address 11 Jacqueline Circle	State	Zip Code		Date of 05	/	۔ ا	0:10	/ 0823713	2012	Ŷ
	Richboro FEC ID number of contributing federal political committee.	PA C	18954							is Period 1000	.00
	Temple University Receipt For: Primary General Other (specify) ▼										
C.	Full Name (Last, First, Middle Initial) Dr. John T Hicks Mailing Address 917 Bypass 225 South			_	Date o	of Re	D	D 10	/ Y	2012	Y
	City Greenwood FEC ID number of contributing federal political committee. Name of Employer	State SC C Occupation	Zip Code 29646						082371 ceipt thi		
	Greenwood Regl Rheum Center, P.A Receipt For: Primary General Other (specify) ▼	Aggregate	ogist Year-to-Date ▼ 250.00								
	UBTOTAL of Receipts This Page (optional)			•		-	7		,	1750	00
1 T	OTAL This Period (last page this line number	only)	••••••	•	la de la companya de		7				

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PAGE 13 OF

		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			
NAME OF COMMITTEE (In Full) American College of Rheumat	tology (Rhe	eumPAC)	
Full Name (Last, First, Middle Initial) Dr. Elizabeth D Ferucci Mailing Address 11830 Moose Road City Anchorage FEC ID number of contributing federal political committee. Name of Employer Alaska Native Tribal Health Consortium Receipt For:	State AK C Occupation Physician	Zip Code 99516	Date of Receipt
Other (specify) ▼		500.00]
Full Name (Last, First, Middle Initial) B. Michael C Schweitz Mailing Address 7721 Pine Tree LN City	State	Zip Code	Date of Receipt
West Palm Beach FEC ID number of contributing federal political committee. Name of Employer Self-Employed	FL C Occupation	33406-7833	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Rheumatolo Aggregate	Year-to-Date ▼ 1000.00	
C. John Lavery Mailing Address 997 Raintree Circle St 120			Date of Receipt
City Allen FEC ID number of contributing federal political committee.	State TX	Zip Code 75013	Transaction ID : 10824250 Amount of Each Receipt this Period 250.00
Name of Employer self Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation physician Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			1750.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Rheumato	logy (Rhe	eumPAC)	
А.	Full Name (Last, First, Middle Initial) Erin Arnold Mailing Address 1331 Greenwood			Date of Receipt
	City	State	Zip Code	05 11 2012 Transaction ID : 10824251
	Wilmette	IL	60091	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Illinois Bone and Joint Inst.	Occupation Physician		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		500.00]
в.	Full Name (Last, First, Middle Initial) David Daikh			Date of Receipt
	Mailing Address 3633 Clement			05 11 2012
	City	State	Zip Code	Transaction ID : 10824262
	San Francisco	CA	94121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer UCSF/VA Medical Center	Occupation Rheumatolo		
	Receipt For: Primary General Other (specify) ▼]		
с.	Full Name (Last, First, Middle Initial) John A Goldman			Date of Receipt
	Mailing Address 5800 Timberlane Terrace			M = M / D = D / Y = Y = Y = Y Y 05 13 2012
	City Atlanta	State GA	Zip Code 30328	Transaction ID : 10824800
		UA	50520	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer	Occupation		
	John A Gold MAN MD PC Receipt For:	Rheumatol		
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	L	250.00]
s	UBTOTAL of Receipts This Page (optional))	1000.00
т	OTAL This Period (last page this line number	only)		

Use separate schedule(s) for each category of the

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PAGE 15 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14		11c 15	12 16	17
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) American College of Rheumato	logy (Rhe	eumPAC)								
Full Name (Last, First, Middle Initial) A. Frederick Dietz Mailing Address 4003 Cushman Close City Rockford	State IL	Zip Code 61114			/ sacti	15 on ID	: 10	 / Y 830499 eipt thi 	2012 9 is Period	Ŷ
FEC ID number of contributing federal political committee. Name of Employer Rockford Health System Receipt For:	C Occupation Rheumatolo Aggregate]			g. 1			500	.00
Full Name (Last, First, Middle Initial) B. Bruce Trimble Mailing Address 1038 Fair Meadow Drive				Date o	f Re	ceipt	D	/ Ү	2012	Y
City Mason City FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center - North Iowa Receipt For: Primary General	State IA C Occupation physician Aggregate	Zip Code 50401 Year-to-Date ▼		Trans		on ID	: 108	830501 eipt thi		.00
C. Other (specify) ▼ Full Name (Last, First, Middle Initial) Joan Marie Von Feldt Mailing Address 716 Taunton Road		250.00		Date of	f Re	ceipt		/ Y	у у 2012	Ŷ
City Wilmington FEC ID number of contributing federal political committee. Name of Employer University of Pennsylvania/Philadelphi Receipt For: □ Primary □ General Other (specify) ▼	State DE C Occupation Professor o Aggregate							83987 eipt thi	is Period	.00
SUBTOTAL of Receipts This Page (optional)			-		-	<u> </u>		7	1250	.00

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		-	\square	11b	11c	12											
	ny information copied from such Reports and S for commercial purposes, other than using the					purp														
	NAME OF COMMITTEE (In Full) American College of Rheumato	logy (Rhe	eumPAC)																	
Α.	Full Name (Last, First, Middle Initial) Max Hamburger Mailing Address 315 Middle Co Rd								Date of Receipt											
	City	State	Zip Code		05		21	1084279	2012	Ŷ										
	Smithtown	NY	11787		Amoun	t of E	Each F	Receipt th	is Period											
	FEC ID number of contributing federal political committee.	С					,		2100	00										
	Name of Employer Rheum Assoc of Long Island	Occupation Physician																		
	Receipt For:		Year-to-Date ▼																	
	Other (specify) ▼		2100.00																	
В.	Full Name (Last, First, Middle Initial) Yvonne Sherrer				Date o	f Red	ceipt													
	Mailing Address 21645 Fall River Drive	Address 21645 Fall River Drive																		
	City	State	Zip Code		Trans	actio	<u>on ID :</u>	1084280	2012 0											
	Boca Raton	FL	33428		Amoun	t of E	Each F	Receipt th	is Period											
	FEC ID number of contributing federal political committee.	С				,		300.	00											
	Name of Employer Arthritis Center	ogist																		
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 300.00]																	
<u>с</u> .	Full Name (Last, First, Middle Initial) Charles King				Date o	f Red	ceipt													
	Mailing Address 179 Edgewater Cv				м м 05	/	D 18		ү 2012	Y										
	City Belden	State MS	Zip Code 38826-9145					: 1084280												
	FEC ID number of contributing federal political committee.	С			Amoun	tore	zach F	Receipt th	900	.00										
	Name of Employer	Occupation																		
	NMMCI	Physician																		
	Receipt For: Primary General Other (specify) ▼																			
⊢	CUBTOTAL of Receipts This Page (optional)		r					7	3300.	00										

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PAGE 17 OF

		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
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NAME OF COMMITTEE (In Full) American College of Rheum	atology (Rhe	eumPAC)										
Full Name (Last, First, Middle Initial) Kent K Huston MD Mailing Address			Date of Receipt									
City	State	Zip Code	05 22 2012 Transaction ID : 10845340									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer Saint Luke's Physician Partners Receipt For: Primary General Other (specify)	Aggregate]									
B. Full Name (Last, First, Middle Initial) Mailing Address 3277 Rose Glen CT	State	Zip Code	Date of Receipt									
Falls Church FEC ID number of contributing federal political committee.	VA	22042	Transaction ID : 10845341 Amount of Each Receipt this Period 400.00									
Name of Employer Arthritis & Rheumatism Assoc. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate	Year-to-Date ▼ 400.00]									
Full Name (Last, First, Middle Initial) C. Gary Firestein Mailing Address 9500 Gilman Dr. City La Jolla FEC ID number of contributing federal political committee. Name of Employer	State CA Ccupation		Date of Receipt									
UCSD School of Medicine Receipt For: Primary General Other (specify) v	rheumatolo Aggregate	gist Year-to-Date ▼ 250.00]									
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PAGE 18 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) American College of Rheumato	ology (RheumPAC)	
Full Name (Last, First, Middle Initial) A. Christopher Antolini MD Mailing Address 830 Fillmore Street City Denver FEC ID number of contributing federal political committee. Name of Employer Denver Arthritis Clinic Receipt For: Primary General	State Zip Code CO 80206-3850 C Occupation physician Aggregate Year-to-Date ▼	Date of Receipt
Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Douglas W White Mailing Address 3111 Gundersen Dr	250.00	Date of Receipt
City Onalaska FEC ID number of contributing federal political committee. Name of Employer Onalaska Clinic Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code WI 54650 C Occupation Rheumatologist Aggregate Year-to-Date ▼ 500.00	Transaction ID : 10846377 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Michael P Stevens Mailing Address 101 S. San Mateo Dr. City San Mateo FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) ▼	State Zip Code C 94401 C Occupation Rheumatologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt 05 24 2012 Transaction ID : 10846507 Amount of Each Receipt this Period 500.00
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	NAME OF COMMITTEE (In Full) American College of Rheumatol	ogy (Rhe	eumPAC)										
Α.	Full Name (Last, First, Middle Initial) Joseph P. Lemmer Mailing Address 5342 Doe Run Rd.	2			Date of Receipt								
	City Poanoke	State VA	Zip Code 24018	-			o <mark>n ID : 1</mark> Each Re			riod			
	FEC ID number of contributing federal political committee.	С						, teipt ti	113 1 6	500.	00		
	Name of Employer Lewis-Gale Phys. Receipt For:	Occupation Physician											
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00										
	Full Name (Last, First, Middle Initial) Kent A Huston MD				Date of	f Rec	eipt						
	Mailing Address 4330 Wornall Rd Suite 40				M M 05	/	D D D 24	/ Y	201	ү 2	Y		
	City Kansas City	State MO	Zip Code 64111				o <mark>n ID : 1</mark> Each Re			riod			
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	Name of Employer The Medical Plaza II	Occupation Physician											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00										
	Full Name (Last, First, Middle Initial)				Date of	f Rec	eipt						
	Mailing Address 3534 Pine St				м м 05	/	D D D 30	/ Y	y 201	ү 2	Y		
	City Omaha	State NE	Zip Code 68105				o <mark>n ID : 1</mark> Each Re			riod	_		
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	Name of Employer	Occupation	1										
	Univ. of Nebraska Med Center	Physician											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00										
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	NAME OF COMMITTEE (In Full)		,,							-			
	American College of Rheumatol	logy (Rhe	eumPAC)										
Α.	Full Name (Last, First, Middle Initial) Donald Leonard			Date	of R	eceipt							
	Mailing Address			05	5	30	Y 7) 12	Y			
	City	State AR	Zip Code				108479 Receipt t		eriod				
	FEC ID number of contributing federal political committee.	С				7			365.	00]		
	Name of Employer self	Occupation rheumatolo											
	Receipt For: Primary General Other (specify) v		Year-to-Date ▼ 365.00										
в.	Full Name (Last, First, Middle Initial) Steven Wees			Date	of R	eceipt							
	Mailing Address 16120 W. Dodge Ro				M	04	Y 7	_ 20	12	Y			
	City Omaha	State NE	Zip Code 08118	Tra	nsact	tion ID :	1085828 Receipt t	84					
	FEC ID number of contributing federal political committee.	С				J			250.0	00]		
	Name of Employer Physicians Clinic	Occupation											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00										
	Full Name (Last, First, Middle Initial) Robert Levin			Date	of B	eceipt							
0.	Mailing Address 1050 Roundstone PI				M	04		20	12	Y			
	City Palm Harbor	State FL	Zip Code 34698				108582	86					
	FEC ID number of contributing federal political committee.	С			unt of		Receipt t		eriod 1000.	00]		
	Name of Employer	Occupation		_									
	Robert W. Levin MD PA Receipt For:	Physician		_									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00										
	UBTOTAL of Receipts This Page (optional)				-	7			1615.0	0]		

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PAGE 21 OF

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NAME OF COMMITTEE (In Full) American College of Rheuma	atology (RheumPAC)	
A. Full Name (Last, First, Middle Initial) E. Robert Harris Mailing Address 8151 Cielo Vista Drive City Whittier FEC ID number of contributing	State Zip Code CA 90605	Date of Receipt 06 12 2012 Transaction ID : 10891923 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer St Joseph Health Care Receipt For: Primary General Other (specify) ▼	Occupation rheumatologist Aggregate Year-to-Date ▼ 250.00	
B. Hull Name (Last, First, Middle Initial) Matthew Mundwiler Mailing Address 324 Crestwood		Date of Receipt
City Mount Prospect FEC ID number of contributing federal political committee. Name of Employer Rockford Orthopedic Associates	State Zip Code IL 60056 C Occupation physician	Transaction ID : 10910823 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) V	Aggregate Year-to-Date ▼ 250.00	
C. Deborah Doud Mailing Address 121 N. 251st Street City Waterloo FEC ID number of contributing federal political committee.	State Zip Code NE 68069	Date of Receipt 06 19 2012 Transaction ID : 10916151 Amount of Each Receipt this Period 365.00
Name of Employer NE Orthopedic Hospital Receipt For: Primary General Other (specify) v	Occupation Physicians Aggregate Year-to-Date ▼ 365.00]
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	y information copied from such Reports and St for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) American College of Rheumatol	ogy (Rhe	eum	יPAC)										
Α.	Full Name (Last, First, Middle Initial) Jayashree Sinha					Date of Receipt								
	Mailing Address 309 E 16th City	State		Zip Code			м м 06 Trans		26	109227	2012 42	Y		
	Portales	NM		88130		A					his Perio	d		
	FEC ID number of contributing federal political committee.	С							,	7	25	0.00		
	Name of Employer Mercy Arthritis andOsteoporosis Center	Occupation Doctor	ו											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year		0.00									
В.	Full Name (Last, First, Middle Initial) Edward Herzig						Date o	f Re	ceipt					
	Mailing Address 419 Reilly Road					[м м 06			ר / D	2012	Y		
	City Cincinnati	State OH		Zip Code 45215						109275 Receipt t	17 his Perio	d		
	FEC ID number of contributing federal political committee.	С							,		50	0.00		
	Name of Employer Herzig Krall Medical Group	Occupation Physician	ו											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 1000).00									
с.	Full Name (Last, First, Middle Initial) Howard M Kenney MD						Date o	f Re	ceipt					
	Mailing Address 105 W 8th Ave						м м 06		D 29)	2012	Y		
	City Spokane	State WA		Zip Code 99204	-					: 109276	38 his Perio	d		
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	Name of Employer	Occupation	۱											
	Arthritis Northwest	Rheumatol	ogist											
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) American College of Rheumatolo	ogy (Rhe	eumPAC)	
Α.	Full Name (Last, First, Middle Initial) C. Ronald Mackenzie Mailing Address 6 Lavender Lane			Date of Receipt
	City Rye	State NY	Zip Code 10580	Transaction ID : 10957620 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Hospital for Special Surgery Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate	Year-to-Date ▼ 250.00	
в.	Full Name (Last, First, Middle Initial) Donald Leonard Mailing Address			Date of Receipt
	City	State AR	Zip Code	05 31 2012 Transaction ID : 10957663 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		0.00
	Name of Employer self	Occupation rheumatolog		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$365.00 This changes the YTD Total to \$0.00
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation		
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s	UBTOTAL of Receipts This Page (optional)			250.00
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			for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17				
	y information copied from such Reports and Si for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) American College of Rheumatol	ogy (Rhe	eumPAC)					
Α.	Full Name (Last, First, Middle Initial) American College of Rheumatology Mailing Address 2200 Lake Boulevard NE City	State	Zip Code	Date of Receipt 04 / 16 / 2012 Transaction ID : 10757997				
	Atlanta	GA	30319	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		992.90				
	Name of Employer	Occupation	1					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1911.95	Jan/Feb/March credit card fees				
Β.	Full Name (Last, First, Middle Initial) American College of Rheumatology	Date of Receipt						
	Mailing Address 2200 Lake Boulevard NE			06 29 2012				
	City Atlanta	State GA	Zip Code 30319	Transaction ID : 10938874				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 971.11				
	Name of Employer	_						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2883.06	April and May credit card fees				
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt				
	Mailing Address							
	City	State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С						
	Name of Employer	of Employer Occupation						
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S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 25 OF 3								
IT	EMIZED DISBURSEMENTS	Use separate schedule(for each category of the	s)		k only							
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	NAME OF COMMITTEE (In Full)											
	American College of Rheumatolog	y (RheumPAC)										
^	Full Name (Last, First, Middle Initial)					Data of	: ם:	huro	mont			
А.	Matheson For Congress					Date of Disbursement						
	Mailing Address P O Box 521048 Suite A					04 13 2012						
	5	State Zip Code				Transaction ID : 10757332						
	Salt Lake City Purpose of Disbursement	UT 84152										
	Fulpose of Disbursement			011		Amount	t of	Each	Disburs	emer	nt this	Period
	Candidate Name			atego	rv/			-	_			_
	Rep. James Matheson			Type				7			150	0.00
		ment For: 2012										
	Senate X	Primary General										
	State: UT District: 02	Other (specify)										
_	Full Name (Last, First, Middle Initial)											
В.						Date of	i Dis	sburse	ement			
						M M	/	D	D /	Y	Y Y	Y
	Mailing Address P.O. Box 391					04		1	3	2	2012	
	City State Zip Code Hopkinsville KY 42241							Transaction ID : 10757334				
	Purpose of Disbursement							_				
	April 16 event in DC			011		Amount of Each Disbursement this Period						
	Candidate Name		Ca	ategoi	ry/	1000.00						
	Rep. Edward Whitfield			Туре								
	Office Sought: House Disburser Senate President State: KY District: 01	ment For: 2012 Primary X General Other (specify) ▼				April 16	eve	ent in l	DC			
_	Full Name (Last, First, Middle Initial)											
C.	Friends Of Joe Heck					Date of Disbursement						
	Mailing Address PO Box 750114					04			3		2012	
	City Las Vegas	StateZip CodeNV89136				Trans	act	ion ID	: 10757	335		
	Purpose of Disbursement April 18 event in DC											
	Candidate Name			011		Amount	t of	Each	Disburs	emer	nt this	Period
	Rep. Joseph Heck		Ca	atego Type							100	0.00
		ment For: 2012		турс				7				
	State: NV District: 03		April 18	eve	nt in [C						
	erere 144 Biothor 02						_	_			_	
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)	/– •	-												
	American College of Rheumatolog	y (Rheu	ImPAC)												
Α.	Full Name (Last, First, Middle Initial) Friends Of Joe Pitts						Date of Disbursement								
	Mailing Address PO Box 775						04 / D D / Y Y Y Y 04 13 2012								
	CityStateZip CodeUnionvillePA19375						Transaction ID : 10757336								
	Purpose of Disbursement April 17 event in DC			0	11		Aı	noun	t of	Each	Dis	sburse	ment	t this	Period
	Candidate Name Rep. Joseph Pitts			Cate Ty	egor ype	y/				7				1000	0.00
	Office Sought: House Disburser	nent For: Primary Other (spe	General				Ap	oril 17	eve	ent in [C				
в.	Full Name (Last, First, Middle Initial) Roskam For Congress Committee					Date of Disbursement									
	Mailing Address P. O. Box 713							04		1	3		2	012	
	Wheaton	State IL	Zip Code 60187					Trans	sacti	ion ID):1	107573	37		
	Purpose of Disbursement April 17 event in DC Candidate Name		011		Amount of Each Disbursement this Period										
	Rep. Peter Roskam				Category/ Type		1000.00								
	Senate	nent For: Primary Other (spe	2012 X General ecify) ▼				April 17 event in DC								
C.	Full Name (Last, First, Middle Initial) Bill Cassidy For Congress						Date of Disbursement								
	Mailing Address PO Box 80505						05 / D D / Y Y Y Y 05 07 2012								
	City Saton Rouge	State LA	Zip Code 70898				-	Trans	sacti	ion ID):1	108058	33		
	Purpose of Disbursement			0	11		Aı	moun	t of	Each	Dis	sburse	ment	t this	Period
	Candidate Name Rep. Bill Cassidy MD			Cate Ty	egor ype	ry/	1000.00					0.00			
	e: LA District: 06 Disbursement For: 2012 President Disbursement For: 2012 Primary ∑ General Other (specify) ▼														
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)											
	American College of Rheumatolog	y (Rheı	umPAC)									
	Full Name (Last, First, Middle Initial)						D					
А.	Texans For Henry Cuellar Congres	ssional	Campaign				Date of Disbursement					Y
	Mailing Address 1519 Washington Street Suite 200					05 07 2012						
	,	State TX	Zip Code				Transaction ID : 10805834					
	Laredo Purpose of Disbursement		78042									
				0	11		Amount	t of E	ach [Disburser	nent this	s Period
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	Rep. Henry Cuellar			Ту	/pe			7	_	7		
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	State: TX District: 28											
	Full Name (Last, First, Middle Initial)											
В.	MICHAEL BURGESS FOR CONG					Date of	f Disb	urser		YY	V	
	Mailing Address PO Box 2334						05 07 2012				- T	
	City Denton	State TX	Zip Code 76202				Trans	actio	n ID :	: 108058	35	
	Purpose of Disbursement						Amount of Each Disbursement this Period					s Period
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	Michael C. Burgess				/pe	,.		. ,			10	00.00
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	American College of Rheumatolog	y (RheumP	AC)								
^	Full Name (Last, First, Middle Initial)				Date of Disbursement						
А.	Upton For All Of Us										
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_	Full Name (Last, First, Middle Initial)										
C.	Friends Of Joe Heck				Date of Disbursement						
	Mailing Address PO Box 750114				06 26 2012						
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	Las Vegas	NV 89	136								
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	American College of Rheumatolog	y (RheumF	PAC)										
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Α.	Tim Murphy For Congress					Date of Disbursement							
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	5		p Code			Trans	action II) : 109231	65				
	Pittsburgh	PA 15	5234			Trans		. 103231	05				
	Purpose of Disbursement			011		Amount	of Each	Disburse	ment this	Period			
	Candidate Name			Catego	ory/				400	2.00			
	Rep. Tim Murphy			Туре					100	5.00			
	Office Sought: House Disburser Senate President State: PA District: 18	nent For: 2012 Primary D Other (specify)	C General										
	Full Name (Last, First, Middle Initial)												
В.	Jim Gerlach For Congress Commi	ttee					Disburs						
	Mailing Address PO Box 87					06		26	2012	Y			
	City Uwchland		p Code 9480			Trans	action II	D : 109231	66				
	Purpose of Disbursement		011	1	Amount of Each Disbursement this Period								
	Candidate Name		Category/		2000.00								
	Rep. James Gerlach			Туре		_			200	0.00			
	Office Sought: House Disburser Senate President State: PA District: 06	nent For: 2012 Primary Other (specify)	General										
	Full Name (Last, First, Middle Initial)												
C.	Gingrey For Congress					Date of Disbursement							
	Mailing Address PO Box U					06		26	2012				
	City	State Zi	p Code			T							
	Marietta	GA 30	0060			Trans	action II	D : 109231	67				
	Purpose of Disbursement												
				011		Amount	of Each	Disburse	ment this	Period			
	Candidate Name			Catego					2000	0.00			
	Rep. Phil Gingrey M.D.			Туре	e	_		7	200				
	Office Sought: House Disburser Senate President	nent For: 2012 Primary D Other (specify)	C General										
_	State: GA District: 11												
⊢	UBTOTAL of Disbursements This Page (optional)						7		5000	0.00			
ΙT	OTAL This Period (last page this line number only)				🕨	1							

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 31 OF 33					
ITEMIZED DISBURSEMENTS		(check only	ly one)					
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b					
Any information copied from such Reports and States or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full)								
American College of Rheumatolog	y (RheumPAC)							
Full Name (Last, First, Middle Initial)			Date of Distance and					
A. Rogers For Congress			Date of Disbursement					
Mailing Address PO Box 581 Post Office Box 581			06 26 2012					
,	State Zip Code MI 48116		Transaction ID : 10923168					
Brighton Purpose of Disbursement	MI 48116							
		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
Rep. Michael Rogers Office Sought: V House Disburser	ment For: 2012	Туре						
Senate	Primary General							
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Full Name (Last, First, Middle Initial)								
B.			Date of Disbursement					
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maining Address	-							
City	City State Zip Code							
Purpose of Disbursement	Purpose of Disbursement							
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		Category/ Type						
	ment For:							
Senate President	Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial)								
C.			Date of Disbursement					
Mailing Address								
City	State Zip Code							
Purpose of Disbursement								
Candidate Name	Candidate Name							
Senate	ment For: Primary General	Туре						
State: District:	Other (specify)							
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SUBTOTAL of Disbursements This Page (optional)		····· •	1000.00					
TOTAL This Period (last page this line number only)	····· >	33500.00					

SCH	EDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 32 OF 33						
ITEN	IIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	/ one)					
		Detailed Summary Page	210	22 23 24 25 26 X 28a 28b 28c 29 30b					
	nformation copied from such Reports and Statem commercial purposes, other than using the nam			on for the purpose of soliciting contributions					
	ME OF COMMITTEE (In Full)								
/	merican College of Rheumatology	/ (RheumPAC)							
	II Name (Last, First, Middle Initial)			Date of Disbursement					
	onald Leonard			M M / D D / Y Y Y Y Y					
Ma	iling Address			05 31 2012					
Cit	y S	State Zip Code AR		Transaction ID : 10847976					
Pu	rpose of Disbursement	1	010	Amount of Each Disbursement this Period					
Ca	ndidate Name		Category/						
	fice Sought: House Disbursen	nent For:	Туре	365.00					
UI	Senate	Primary General Other (specify)							
	ate: District:								
Ful B.	II Name (Last, First, Middle Initial)		Date of Disbursement						
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~	fice Sought:	aont For:	Туре	<u> </u>					
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0		Other (specify)							
	ate: District: II Name (Last, First, Middle Initial)								
C .	(,,			Date of Disbursement					
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Ca	indidate Name		Category/ Type	Amount of Each Disbursement this Period					
Off	fice Sought: House Disbursen								
Sta		Other (specify)							
SUB	TOTAL of Disbursements This Page (optional)		••••••	365.00					
тот	AL This Period (last page this line number only)		•••••• •	365.00					

SC	HEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 33 OF 33				
	ITEMIZED DISBURSEMENTS		arate schedule(s) category of the Summary Page	(check only 21b 27	y one) 22 23 24 25 26 28a 28b 28c X 29 30b				
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nar	ments may ne and add	not be sold or use ress of any politica	ed by any perso al committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)								
$ \rangle$	American College of Rheumatolog	y (Rheu	mPAC)						
<u>ــــــــــــــــــــــــــــــــــــ</u>	Full Name (Last, First, Middle Initial)				Data of Disburgament				
А.	SunTrust Bank Charges				Date of Disbursement				
	Mailing Address PO Box 622227				04 30 2012				
	5	State	Zip Code		Transaction ID : 10915137				
	Orlando Purpose of Disbursement	FL	32862-2227						
		001		001	Amount of Each Disbursement this Period				
	Candidate Name			Category/ Type	477.38				
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼						
	State: District:								
В.	Full Name (Last, First, Middle Initial) SunTrust Bank Charges				Date of Disbursement				
	Mailing Address PO Box 622227		05 31 2012						
	Orlando	State FL	Zip Code 32862-2227		Transaction ID : 10915138				
	Purpose of Disbursement May credit card fees	001	Amount of Each Disbursement this Period						
	Candidate Name	Category/ Type			493.73				
	Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		May credit card fees				
_	Full Name (Last, First, Middle Initial)								
C.	SunTrust Bank Charges				Date of Disbursement				
	Mailing Address PO Box 622227				06 / 0 D D / Y Y Y Y 2012				
	City Orlando	State FL	Zip Code 32862-2227		Transaction ID : 10957624				
	Purpose of Disbursement June credit card fees			001					
	Candidate Name	001 Category/ Type	Amount of Each Disbursement this Period 679.34						
	Senate President	ment For: Primary Other (spe	General cify) ▼		June credit card fees				
_	State: District:								
s	UBTOTAL of Disbursements This Page (optional)				1650.45				
Т	OTAL This Period (last page this line number only))		••••••	1650.45				